



State of Washington
Application for a Water Right Permit

☐ SURFACE WATER ☒ GROUND WATER
☒ Permanent ☐ Temporary ☐ Short Term

For Ecology Use
(Date Stamp)

10 FEB 10 09:18

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

Applicant/Business Name: City of Bonney Lake	Phone No: (253) 862-8602	Other No: (253) 826-1921 Fax
Address: 19306 Bonney Lake Blvd.		
City: Bonney Lake	State: WA	Zip: 98391-0944
Email Address (optional):		

Contact Name (if different from above): Dan Grigsby	Phone No: (253) 447-4347	Other No:
Relationship to Applicant: Public Works Director		
Address: 8720 Main Street East		
City: Bonney Lake	State: WA	Zip: 98391
Email Address (optional) grigsbyd@ci.bonney-lake.wa.us		
NOTE ADDITIONAL CONTACT PERSON: Thomas M. Pors, Law Office of Thomas M. Pors, 1700 Seventh Avenue, Suite 2100, Seattle WA 98101 (206) 357-8570; (866) 342-9646 FAX tompors@comcast.net		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Municipal Water Supply to meet future growth demands

Anticipated length of time to complete your project: 2040

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only) <input type="checkbox"/> Cubic Feet per Second (CFS) <input checked="" type="checkbox"/> Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Municipal	2250	1814.6	Continuously
TOTAL:	2250	1814.6	

Short Term/Temporary Water Use

For Ecology Use	APPLICATION NO. <u>G2-30540</u> SEPA: Exempt/Not Exempt
Fee Paid: _____	Check No: _____ ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By <u>SC</u> Priority Date <u>2/10/10</u> By <u>SC</u> WRIA: <u>10</u>

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source	B.) If Ground Water Source
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: _____	Well diameter & depth: <u>large diameter municipal wells</u>
Tributary to: _____	Number of proposed points of withdrawal: <u>2</u>
Number of proposed diversion points: _____	Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test.
	Well Tag ID No. (Note: City of Bonney Lake has existing wells, but none of them would be appurtenant to this application)

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
	All	NE	26	20N	5E	Pierce
	All	NW	25	20N	5E	Pierce
	All	SE	23	20N	5E	Pierce
	All	SW	24	20N	5E	Pierce
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

_____ Feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)
from the (☐NW ☐SW ☐NE ☐SE ☐____) corner of Section _____.

Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:

_____ feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)
from the (☐NW ☐SW ☐NE ☐SE ☐____) corner of Section _____.

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☐ YES ☒ NO

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☒ NO

Provide the owner name(s), address, and phone number: Well sites are under review and owner permission

will be obtained prior to drilling test wells.

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

For Ecology Use	APPLICATION NO: _____ SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____ ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____ Priority Date _____ By _____ WRIA: _____

Area served by City of Bonney Lake, as described in its Water System Plan						
1/4	1/4	Section	Twp.	Range	County	Parcel No.

Do you own all the lands on which the proposed place of use is located? ☐ YES ☒ NO.

If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO

Provide owner name(s), address, and phone number: The City of Bonney Lake is the designated water service provider for the Bonney Lake water service area.

Are there any other water rights or claims associated with this property or water system? ☒ YES ☐ NO

If yes, provide the water right and/or claim numbers: See City of Bonney Lake Comprehensive Water System Plan, Table 6-1, attached.

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): New high capacity, municipal well(s) to connect to existing City of Bonney Lake water supply system; mitigation for impacts to White River instream flows to be purchased from and supplied by Cascade Water Alliance pursuant to water right S2-29934.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: _____	Present population to be served water: <u>33,000</u>
Type of connections: <i>(e.g., home, recreational cabin)</i> _____	Estimate future population to be served: <u>56,650</u>

C.) Water System Planning

Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? ☒ YES ☐ NO

If yes, date plan was approved 23 February 2009

Water System Number: 07650

Name of water system: City of Bonney Lake Water System

Are you within the service area of an existing water system? ☐ YES ☒ NO

If yes, explain why you are unable to connect to the system: N/A

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application =

None _____ ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: _____

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site:

Site Address: Well site(s) still under investigation; contact applicant for details.

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Daniel L. Grigsby
Print Name
(Applicant or authorized representative)

D. L. Grigsby
Signature

21 JAN 2010
Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Submit your application to: DEPARTMENT OF ECOLOGY
CASHIERING SECTION
PO BOX 47611
OLYMPIA, WA 98504-7611

Please check the region in which your proposed project is located.
☒ Southwest ☐ Northwest ☐ Central ☐ Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.